

|  |  |   |  |  |  |  |                       |
|--|--|---|--|--|--|--|-----------------------|
| <b>SOLICITATION/CONTRACT/ORDER FOR COMMERCIAL ITEMS</b>  |  |   |  | <b>1. Requisition Number</b><br>SEE SCHEDULE   |  | <b>Page</b> 1 <b>Of</b> 4                |                       |
| <b>Offeror To Complete Block 12, 17, 23, 24, &amp; 30</b>  |  |   |  |  |  |  |                       |
| <b>2. Contract No.</b><br>DAAE07-02-D-S036   |  | <b>3. Award/Effective Date</b><br>2004JAN06   |  | <b>4. Order Number</b><br>0013   |  | <b>5. Solicitation Number</b>            |                       |
| <b>6. Solicitation Issue Date</b>  |  |   |  |  |  |  |                       |
| <b>7. For Solicitation Information Call:</b>   |  | <b>A. Name</b><br>LENORE MYERS  |  | <b>B. Telephone Number (No Collect Calls)</b><br>(586) 574-8121  |  | <b>8. Offer Due Date/Local Time</b>      |                       |
| <b>9. Issued By</b><br>TACOM WARREN BLDG 231<br>AMSTA-AQ-ATAC<br>WARREN, MICHIGAN 48397-5000<br><br>HTTP://CONTRACTING.TACOM.ARMY.MIL<br><br><b>e-mail:</b> MYERSLE@TACOM.ARMY.MIL   |  | <b>10. This Acquisition Is</b><br><input checked="" type="checkbox"/> Unrestricted<br><input type="checkbox"/> Set Aside: % For<br><input type="checkbox"/> Small Business<br><input type="checkbox"/> Small Disadv Business<br><input type="checkbox"/> 8(A)<br><br><b>SIC:</b><br><b>Size Standard:</b> |  | <b>11. Delivery For FOB Destination Unless Block Is Marked</b><br><input type="checkbox"/> See Schedule  |  | <b>12. Discount Terms</b><br>NET 30 DAYS |                       |
|  |  |   |  | <input checked="" type="checkbox"/> <b>13a. This Contract Is A Rated Order Under DPAS (18 CFR 700)</b>   |  |  |                       |
|  |  |   |  | <b>13b. Rating</b> DOA4  |  |  |                       |
|  |  |   |  | <b>14. Method Of Solicitation</b><br><input type="checkbox"/> RFQ <input type="checkbox"/> IFB <input type="checkbox"/> RFP                        |  |  |                       |
| <b>15. Deliver To</b><br>SEE SCHEDULE  |  | <b>Code</b>   |  | <b>16. Administered By</b><br>DCMA CHICAGO<br>1523 WEST CENTRAL ROAD<br>BLDG 203<br>ARLINGTON HEIGHTS IL 60004-2451                                |  |  |                       |
| <b>Code</b>  |  |   |  | <b>Code</b> S1403A   |  |  |                       |
| <b>Telephone No.</b>   |  |   |  |  |  |  |                       |
| <b>17. Contractor/Offeror</b><br>STEINER ELECTRIC COMPANY<br>1250 TOUHY AVENUE<br>ELK GROVE VILLAGE, IL. 60007   |  | <b>Code</b> 9L836 <b>Facility</b>   |  | <b>18a. Payment Will Be Made By</b><br>DFAS - COLUMBUS CENTER<br>DFAS-CO/WEST ENTITLEMENT OPERATIONS<br>P.O. BOX 182381<br>COLUMBUS, OH 43218-2381 |  |  |                       |
| <b>Code</b>  |  |   |  | <b>Code</b> HQ0339   |  |  |                       |
| <b>Telephone No.</b>   |  |   |  |  |  |  |                       |
| <input type="checkbox"/> <b>17b. Check If Remittance Is Different And Put Such Address In Offer</b>  |  | <b>18b. Submit Invoices To Address Shown In Block 18a Unless Block Below Is Checked</b><br><input type="checkbox"/> See Addendum  |  |  |  |  |                       |
| <b>19. Item No.</b>  |  | <b>20. Schedule Of Supplies/Services</b>  |  |  | <b>21. Quantity</b>  | <b>22. Unit</b>                          | <b>23. Unit Price</b> |
|  |  | SEE SCHEDULE  |  |  |  |  |                       |
|  |  | (Attach Additional Sheets As Necessary)   |  |  |  |  |                       |
| <b>25. Accounting And Appropriation Data</b><br>ACRN: AA 97 X4930AC9D 6D 26KB S20113 W56HZV  |  |   |  |  | <b>26. Total Award Amount (For Govt. Use Only)</b><br>\$185,686.96   |  |                       |
| <input type="checkbox"/> <b>27a. Solicitation Incorporates By Reference FAR 52.212-1, 52.212-4. FAR 52.212-3 And 52.212-5 Are Attached.</b>  |  |   |  |  | <input type="checkbox"/> Are <input type="checkbox"/> Are Not Attached.  |  |                       |
| <input checked="" type="checkbox"/> <b>27b. Contract/Purchase Order Incorporates By Reference FAR 52.212-4. FAR 52.212-5 Is Attached. Addenda</b>  |  |   |  |  | <input checked="" type="checkbox"/> Are <input type="checkbox"/> Are Not Attached.   |  |                       |
| <b>28. Contractor Is Required To Sign This Document And Return _____ Copies</b><br><input type="checkbox"/> To Issuing Office. Contractor Agrees To Furnish And Deliver All Items Set Forth Or Otherwise Identified Above And On Any Additional Sheets Subject To The Terms And Conditions Specified Herein. |  |   |  |  | <b>29. Award Of Contract: Reference _____ Offer</b><br><input type="checkbox"/> Dated _____. Your Offer On Solicitation (Block 5) Including Any Additions Or Changes Which Are Set Forth Herein Is Accepted As To Items: |  |                       |
| <b>30a. Signature Of Offeror/Contractor</b>  |  |   |  |  | <b>31a. United States Of America (Signature Of Contracting Officer)</b>  |  |                       |
| <b>30b. Name And Title Of Signer (Type Or Print)</b>   |  | <b>30c. Date Signed</b>   |  | <b>31b. Name Of Contracting Officer (Type Or Print)</b><br>MARIE T. GAPINSKI /SIGNED/<br>GAPINSKM@TACOM.ARMY.MIL (586) 574-5333                    |  | <b>31c. Date Signed</b>                  |                       |
| <b>32a. Quantity In Column 21 Has Been</b><br><input type="checkbox"/> Received <input type="checkbox"/> Inspected <input type="checkbox"/> Accepted And Conforms To The Contract Except As Noted  |  |   |  | <b>33. Ship Number</b><br><input type="checkbox"/> Partial <input type="checkbox"/> Final  |  | <b>34. Voucher Number</b>                |                       |
| <b>32b. Signature Of Authorized Government Representative</b>  |  |   |  | <b>32c. Date</b>   |  | <b>35. Amount Verified Correct For</b>   |                       |
| <b>36. Payment</b><br><input type="checkbox"/> Complete <input type="checkbox"/> Partial <input type="checkbox"/> Final  |  |   |  | <b>37. Check Number</b>  |  |  |                       |
| <b>38. S/R Account Number</b>  |  |   |  | <b>39. S/R Voucher Number</b>  |  | <b>40. Paid By</b>                       |                       |
| <b>41a. I Certify This Account Is Correct And Proper For Payment</b>   |  |   |  | <b>42a. Received By (Print)</b>  |  |  |                       |
| <b>41b. Signature And Title Of Certifying Officer</b>  |  |   |  | <b>41c. Date</b>   |  | <b>42b. Received At (Location)</b>       |                       |
|  |  |   |  | <b>42c. Date Recd (YYMMDD)</b>   |  | <b>42d. Total Containers</b>             |                       |

**Name of Offeror or Contractor:** STEINER ELECTRIC COMPANY

| ITEM NO | SUPPLIES/SERVICES  | QUANTITY | UNIT | UNIT PRICE      | AMOUNT            |
|---------|--|----------|------|-----------------|-------------------|
|         | SUPPLIES OR SERVICES AND PRICES/COSTS  |          |      |                 |                   |
| 0032    | NSN: 2520-01-200-3097<br>FSCM: 19207<br>PART NR: 12339300<br>SECURITY CLASS: Unclassified  |          |      |                 |                   |
| 0032AA  | <u>PRODUCTION QUANTITY</u><br><br>NOUN: PROPELLER SHAFT WIT<br>PRON: EH43S434EH      PRON AMD: 01      ACRN: AA<br>AMS CD: 060011<br><br><u>Packaging and Marking</u><br>PACKAGING/PACKING/SPECIFICATIONS:<br>SEE PACKAGING RQMTS SHEET IN TECH DATA<br>LEVEL PRESERVATION: Military<br>LEVEL PACKING: B<br><br><u>Inspection and Acceptance</u><br>INSPECTION: Origin      ACCEPTANCE: Origin<br><br><u>Deliveries or Performance</u><br>DOC                          SUPPL<br><u>REL CD      MILSTRIP      ADDR      SIG CD      MARK FOR      TP CD</u><br>001   W56HZV3347T902   W45G19      J                          2<br><u>DEL REL CD                  QUANTITY                  DEL DATE</u><br>001                          283                          15-APR-2004<br><br>002                          283                          15-MAY-2004<br><br>003                          283                          15-JUN-2004<br><br>004                          283                          15-JUL-2004<br><br>FOB POINT: Destination<br><br>SHIP TO: <u>FREIGHT ADDRESS</u><br>(W45G19)    XR W390 RED RIVER MUNITIONS CTR<br>HIGHWAY 82 WEST CL V TPF<br>GATE 44 BLDG 184<br>TEXARKANA                          TX 75507-5000<br><br><u>CONTRACT/DELIVERY ORDER NUMBER</u><br>DAAE07-02-D-S036/0013 | 1132     | EA   | \$_____92.78000 | \$_____105,026.96 |
| 0052    | NSN: 2520-01-356-9189<br>FSCM: 19207<br>PART NR: 12342620<br>SECURITY CLASS: Unclassified  |          |      |                 |                   |

|                    |  |             |
|--------------------|--|-------------|
| CONTINUATION SHEET | Reference No. of Document Being Continued<br>PIIN/SIIN DAAE07-02-D-S036/0013 MOD/AMD | Page 3 of 4 |
|--------------------|--|-------------|

Name of Offeror or Contractor: STEINER ELECTRIC COMPANY

| ITEM NO | SUPPLIES/SERVICES   | QUANTITY | UNIT | UNIT PRICE  | AMOUNT       |
|---------|---|----------|------|-------------|--------------|
| 0052AA  | <p data-bbox="264 359 480 380"><u>PRODUCTION QUANTITY</u></p> <p data-bbox="264 438 758 512">NOUN: PROPELLER SHAFT,VEH<br/>PRON: EH43S435EH PRON AMD: 01 ACRN: AA<br/>AMS CD: 060011</p> <p data-bbox="264 571 747 697"><u>Packaging and Marking</u><br/>PACKAGING/PACKING/SPECIFICATIONS:<br/>SEE PACKAGING RQMTS SHEET IN TECH DATA<br/>LEVEL PRESERVATION: Military<br/>LEVEL PACKING: B</p> <p data-bbox="264 756 725 804"><u>Inspection and Acceptance</u><br/>INSPECTION: Origin ACCEPTANCE: Origin</p> <p data-bbox="264 863 846 1016"><u>Deliveries or Performance</u><br/>DOC SUPPL<br/><u>REL CD MILSTRIP ADDR SIG CD MARK FOR TP CD</u><br/>001 W56HZV3347T903 W45G19 J 2<br/><u>DEL REL CD QUANTITY DEL DATE</u><br/>001 872 15-APR-2004</p> <p data-bbox="264 1075 513 1096">FOB POINT: Destination</p> <p data-bbox="264 1129 779 1255">SHIP TO: <u>PARCEL POST ADDRESS</u><br/>(W45G19) XR W390 RED RIVER MUNITIONS CTR<br/>HIGHWAY 82 WEST CL V TPF<br/>GATE 44 BLDG 184<br/>TEXARKANA TX 75507-5000</p> <p data-bbox="388 1314 724 1360"><u>CONTRACT/DELIVERY ORDER NUMBER</u><br/>DAAE07-02-D-S036/0013</p> | 872      | EA   | \$ 92.50000 | \$ 80,660.00 |

CONTRACT ADMINISTRATION DATA

| LINE    | PRON/<br>AMS CD/     | OBLG |                           |                           |           |      |         | JOB    |         | ORDER      | ACCOUNTING |            | OBLIGATED  |
|---------|----------------------|------|---------------------------|---------------------------|-----------|------|---------|--------|---------|------------|------------|------------|------------|
| ITEM    | MIPR                 | ACRN | STAT                      | ACCOUNTING CLASSIFICATION |           |      |         | NUMBER | STATION |            |            | AMOUNT     |            |
| 0032AA  | EH43S434EH<br>060011 | AA   | 2                         | 97                        | X4930AC9D | 6D   | 26KB    | S20113 |         | W56HZV     | \$         | 105,026.96 |            |
| 0052AA  | EH43S435EH<br>060011 | AA   | 2                         | 97                        | X4930AC9D | 6D   | 26KB    | S20113 |         | W56HZV     | \$         | 80,660.00  |            |
|         |                      |      |                           |                           |           |      |         |        |         |            | TOTAL      | \$         | 185,686.96 |
| SERVICE |                      |      |                           |                           |           |      |         |        |         | ACCOUNTING |            | OBLIGATED  |            |
| NAME    | TOTAL BY ACRN        |      | ACCOUNTING CLASSIFICATION |                           |           |      | STATION |        |         |            | AMOUNT     |            |            |
| Army    | AA                   |      | 97                        | X4930AC9D                 | 6D        | 26KB | S20113  | W56HZV | \$      | 185,686.96 |            |            |            |
|         |                      |      |                           |                           |           |      |         |        |         |            | TOTAL      | \$         | 185,686.96 |